COMBINED DECLARATION AND POWER OF ATTORNEY

As the below named inventor, I hereby declare that:

FAX: 886-2-2369 7233

My residence, post office address and citizenship are as stated below next to my name and that I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

ACTIVE USB DEVICE

the specification of whi	ch				
X is attached hereto).				
was filed on					
as Application Se	rial No	and was amended on_		·	
specification, including I acknowledge th application in accordar I hereby claim for application(s) for pate	the claims, as amended e duty to disclose info ice with Title 37, Code of eign priority benefits un int or inventor's certific patent or inventor's certi med:	ind understand the content of by any amendment referred in the content of Federal Regulations, § 1. der Title 35, United States Cate listed below and have ifficate having a filing date be	ed to above. the patent .56(a). Code, § 119 also identifi	ability of this of any foreign ied below any	
Number	Country	Date Filed(yyyy/mm/dd)	Yes	No	
92118562	Taiwan, R.O.C.	2003/7/8	X		
		0)			
SEND CORRESPONDENCE TO:			DIRECT TELEPHONE CALLS TO: (Name and telephone number)		
			da Lee		

COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

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